

STATE REGULATION OF MEDICARE SUPPLEMENT PRODUCTS

ADDITIONAL REGULATIONS NOTICE INFORMATION  
(AS 44.62.190(d))

1. Adopting agency: Division of Insurance, Department of Commerce, Community, and Economic Development
2. General subject of regulation: Medicare Supplement
3. Citation of regulation (may be grouped): 3 AAC 28.456 – 3 AAC 28.510
4. Department of Law file number, if any: \_\_\_\_\_

5. Reason for the proposed action:
  - Compliance with federal law or action (identify): The Medicare Access and CHIP Reauthorization Act of 2015 (“MACRA”)
  - Compliance with new or changed state statute
  - Compliance with Federal or state court decision (identify) \_\_\_\_\_
  - Development of program standards
  - Other (identify): \_\_\_\_\_

6. Appropriation/Allocation: Insurance Operations/Insurance Operations

7. Estimated annual costs in the aggregate to comply with the proposed action to:
  - A private person: Medicare Deductible Applicable Amount
  - Another state agency: None are anticipated.
  - A municipality: None are anticipated.

8. Cost of implementation to the state agency and available funding (in thousands of dollars):

|                               | Initial Year<br>FY <u>18</u> | Subsequent<br>Years |
|-------------------------------|------------------------------|---------------------|
| Operating Cost                | \$ <u>0</u>                  | \$ <u>0</u>         |
| Capital Cost                  | \$ <u>0</u>                  | \$ <u>0</u>         |
| 1002 Federal receipts         | \$ <u>0</u>                  | \$ <u>0</u>         |
| 1003 General fund match       | \$ <u>0</u>                  | \$ <u>0</u>         |
| 1004 General fund             | \$ <u>0</u>                  | \$ <u>0</u>         |
| 1005 General fund/<br>program | \$ <u>0</u>                  | \$ <u>0</u>         |
| Other (identify)              | \$ <u>0</u>                  | \$ <u>0</u>         |

9. The name of the contact person for the regulation:
  - Name: Sarah Bailey
  - Title: Insurance Specialist III
  - Address: Alaska Division of Insurance

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10. The origin of the proposed action:

- Staff of state agency
- Federal government
- General public
- Petition for regulation change
- Other (identify) \_\_\_\_\_

11. Date: 10/2/18 Prepared by: Anna Latham  
[signature]

Name (printed): Anna Latham  
Title (printed): Deputy Director  
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